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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
08/828,497	04/05/2001	2163	0.00	027448,0008	6	68	4

CONFIRMATION NO. 6818

## FILING RECEIPT



\*OC00000006153461\*

John H. D'Antico  
Brobeck, Phleger & Harrison LLP  
4801 Plaza on the lake  
Austin, TX 78746

Date Mailed: 06/06/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

→ Jane R. Garrison, Austin, TX;  
→ Dustin M. Davis, Round Rock, TX;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 06/06/2001

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

## Title

Method and system for consummating a transaction in a biometric verification system based on prior transactional histories

RECEIVED

JUN 11 2001

**Preliminary Class**

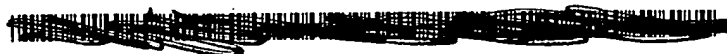
705

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**Data entry by : LEE, KATY**

**Team : OIPE**

**Date: 06/06/2001**



Please type a plus sign (+) inside this box →



PTO/SB/21 (08-00)  
Approved for use through 10/31/2002. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE



## TRANSMITTAL FORM

*Use used for all correspondence after initial filing*

Total Number of Pages in This Submission 26

Application Number	09/828,497
Filing Date	April 5, 2001
Inventors	Davis et al.
Group Art Unit	2163
Examiner Name	To Be Assigned
Attorney Docket No.	027448.0008

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks:	
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

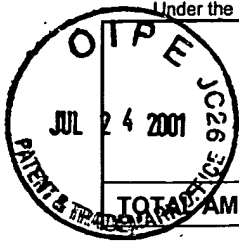
Firm or Individual Name	John H. D'Antico; Brobeck, Phleger & Harrison LLP
Signature	<i>John H. D'Antico</i>
Date	July 20, 2001

### CERTIFICATE OF MAILING

Upon reasonable basis and information and belief, I hereby certify, to the best of my knowledge, that this correspondence, including any papers, letters, or fees referred to as being attached, enclosed, or otherwise affixed herewith, is being deposited with the United States Postal Service on the date set forth below with sufficient postage as First Class Mail in an envelope addressed to Box Missing Parts, Assistant Commissioner for Patents, Washington, D.C. 20231.

Date	July 20, 2001
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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT \$932**
**Complete if Known**

Application Number	09/828,497
Filing Date	April 5, 2001
First Named Inventor	Dustin M. Davis
Examiner Name	To Be Assigned
Group Art Unit	2163
Attorney Docket No.	027448.0008

**METHOD OF PAYMENT**

- 1 ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

 Deposit  
Account  
Number  
  
 Deposit  
Account  
Name

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status.  
See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION**
**1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	355
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

**SUBTOTAL (1) \$355**
**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
68	-20** = 48	9	432
Independent Claims	4	-3** = 1	40
Multiple Independent			

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) \$472**

\*\*Or number previously paid, if greater: For Reissues, see above

**FEE CALCULATION (continued)**
**3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	65
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility Issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid					
<b>SUBTOTAL (3)</b>					<b>\$105</b>

SUBMITTED BY			Complete (if applicable)	
Name (Print/Type)	John H. D'Antico	Registration No. (Attorney/Agent)	45,917	Telephone (512) 330-4000
Signature	<i>John H. D'Antico</i>		Date	July 29, 2001

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